

PARTNER DETAILS



S.No. Particulars

Full Name				
	Individual	Company	Partnership	Other
Legal Status				
Permanent Address				
Bussines / Trading Address				
ID No./CR No./ Registration No.				

Individuals

Nationality	
Occupation or Profession	
Name of Establishment or Employer	
Location of activity	

Is the Customer acting on behalf of another Person?

YES	NO
☐	☐

Name of Beneficial Owner	
ID No./CR No./ Registration No.	
Domicile Country	

If Beneficial Owner is an Individual, then

Nationality			
	Independand Non - Regulator	Independent Regulator	Un-Regulated
Regulatory Status			
Name of Regulator (if any)			
Name of Stock Exchange (if Listed)			
If a Holding company, name of any other subsidiaries/ branches/associated companies			
If not, Group Company (if any)			
If business activities are conducted in more than one country, please indicate names of all countries			
Bank Details			

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Contact Details of Customer

Contact Person

Tel & Fax

E-mail / Website

Contact details of Compliance
Officer (if any)

"Copies* of Customer Identification Documents

Please submit the documents and tick () against the documents attached"

Individual:	ID Card/Passport/Driving License(DL)	Proof of Domicile Country**
Company:	Company Registration (CR)	List & Passport copies of Authorised Signatories
	List of Major Shareholders	List & Proof of Domicile Country** of Directors

Major Shareholders:-Shareholders who, directly or indirectly, owns or controls more than 5% of the shares or voting rights

Partnership:	Certificate of Registration	Partnership Deed	
	List & Passport copies of Authorised Signatories	List & Proof of Domicile Country** of Partners	
Trust:	Certificate of Registration	Trust Deed	List & Passport copies of Settlor, Trustees, Protector
	List & Passport copies of Authorised Signatories	List of Major Beneficiaries	

Major Beneficiaries:-Beneficiary who is to receive atleast 25% of the funds of the Trust

Any other Legal Person:	Registration Document	List & Passport copies of Authorised Signatories
	List of the Individuals/Entities who ultimately owns, or exercises effective control over such person	

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Declaration:

I/We hereby confirm that the above information provided to you is true and correct to the best of our knowledge. I/We acknowledge that if the information provided is found to be false or misleading then the business relationship may be annulled anytime at your discretion. I/We hereby agree to provide any additional information/documentation that may be required.

Date:

Signature of Authorised Signatory:

""Certified copies of documents clearly signed, stamped and dated by any of the following:

- (1) A representative of an embassy, consulate or high commission of the country; or
- (2) A lawyer or attorney; or
- (3) A notary public or commissioner of oaths; or (4) A chartered or certified accountant.

The date of signatory should not be older than 3 months. Copies of certified copies is not acceptable.

**Any document to show the residential address like utility bill, tenancy agreement,etc."